E.D.Pa. AO Pro Se 14 (Rev. 01/21) Complaint for Violation of Civil Rights

FILED HARRISBURG PA

UNITED STATES DISTRICT COURT

NOV 18 2024

PE

DEFUTY CLERK

for the

Eastern District of Pennsylvania

,	Case No.	1:24-CV-1986		
Darrell Bikers	· •	(to be filled in by the Clerk's Office)		
Plaintiff(s) (Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)				
- v -				
- 1	N N			
Defendant(s) (Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)				

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

The Clerk will not file a civil complaint unless the person seeking relief pays the entire filing fee (currently \$350) and an administrative fee (currently \$52) in advance, or the person applies for and is granted in forma pauperis status pursuant to 28 U.S.C. § 1915. A prisoner who seeks to proceed in forma pauperis must submit to the Clerk (1) a completed affidavit of poverty and (2) a copy of the trust fund account statement for the prisoner for the six month period immediately preceding the filing of the complaint, obtained from and certified as correct by the appropriate official of each prison at which the prisoner is or was confined for the preceding six months. See 28 U.S.C. § 1915(a)(2).

If the Judge enters an order granting a prisoner's application to proceed in forma pauperis, then the order will assess the filing fee (currently \$350) against the prisoner and collect the fee by directing the agency having custody of the prisoner to deduct an initial partial filing fee equal to 20% of the greater of the average monthly deposits to the prison account or the average monthly balance in the prison account for the six-month period immediately preceding the filing of the complaint, as well as monthly installment payments equal to 20% of the preceding month's income credited to the account for each month that the balance of the account exceeds \$10.00, until the entire filing fee has been paid. See 28 U.S.C. § 1915(b). A prisoner who is granted leave to proceed in forma pauperis is obligated to pay the entire filing fee regardless of the outcome of the proceeding, and is not entitled to the return of any payments made toward the fee.

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I. The Parties to This Complaint

A.

В.

The Plaintiff(s)	
Provide the information below for each needed. Name All other names by which you have been known: ID Number Current Institution Address	Darrell Actions Darrell Actions OBITE Darrell Actions OBUTE Darrell Actio
The Defendant(s)	
individual, a government agency, and listed below are identical to those conthe person's job or title (if known) and of	ch defendant named in the complaint, whether the defendant is an organization, or a corporation. Make sure that the defendant(s) ntained in the above caption. For an individual defendant, include check whether you are bringing this complaint against them in their ty, or both. Attach additional pages if needed.
Defendant No. 1	JES Robbins
Name	HBO. Police Officer
Job or Title <i>(if known)</i> Shield Number	19011 CA 19011 CA
Employer	HBO. Police Dept
Address	
	City State Zip Code
	City State Zip Code Individual capacity Official capacity
Defendant No. 2	
Name	Jaobbi Idarper
Job or Title (if known)	WRST. Police Dept Officer
Shield Number	HBO. Potice Depot
Employer Address	Him. Course Tree
* MATERIA	HOU: PA- 17101
	City State Zip Code
	Individual capacity Official capacity

		Defendant No. 3	-	
		Name	Don Kins	zinder
		Job or Title (if known)	ROULT Parote	Officer
		Shield Number		
		Employer	ADUH Prox	Jation
		Address		
			HBG.	Pa 17103
			City	State Zip Code
			Individual capacity	Official capacity
		Defendant No. 4		
		Name		
		Job or Title (if known)		
		Shield Number		
		Employer		
		Address		
			Cit.	State Zip Code
			City	_
			Individual capacity	Official capacity
П.	Basis i	for Jurisdiction		
	immur Federa	nities secured by the Constitution a	nd [federal laws]." Under Biv	eprivation of any rights, privileges, or ens v. Six Unknown Named Agents of l officials for the violation of certain
	A.	Are you bringing suit against (ch	eck all that apply):	
		Federal officials (a Bivens of	claim)	
		State or local officials (a §	1983 claim)	
			,	
	В.	the Constitution and [federal law	vs]." 42 U.S.C. § 1983. If you	ghts, privileges, or immunities secured to are suing under section 1983, what being violated by state or local officials?
		*		
		4+1 5th 8th &	14th Amendment	rights
	C.	Plaintiffs suing under Bivens ma are suing under Bivens, what co officials?	ay only recover for the violation is not the violation of	n of certain constitutional rights. If you im is/are being violated by federal

Pa. A	O Pro Se 1	4 (Rev. 01/21) Complaint for Violation of Civil Rights
	D.	Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under <i>Bivens</i> , explain how each defendant acted under color of federal law. Attach additional pages if needed.
200 1.	OR / Prison	incarceration. Plaintill was eventually found not guilty on all chan
	Indicat	e whether you are a prisoner or other confined person as follows (check all that apply): Pretrial detainee
		Civilly committed detainee
		Immigration detainee
		Convicted and sentenced state prisoner
		Convicted and sentenced federal prisoner
		Other (explain)
v.	Statem	ent of Claim
	alleged further any cas	s briefly as possible the facts of your case. Describe how each defendant was personally involved in the wrongful action, along with the dates and locations of all relevant events. You may wish to include details such as the names of other persons involved in the events giving rise to your claims. Do not cite ses or statutes. If more than one claim is asserted, number each claim and write a short and plain ent of each claim in a separate paragraph. Attach additional pages if needed.
	A.	If the events giving rise to your claim arose outside an institution, describe where and when they arose.
	В.	The Everts cross IN the Drea of 1623 Dack St. If the events giving rise to your claim arose in an institution, describe where and when they arose.

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C. What date and approximate time did the events giving rise to your claim(s) occur?

11/4/23 at or cround 1720 Hrs.

D. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what?
Was anyone else involved? Who else saw what happened?)

Hose Police officer along with AN ADULT Porch office approached a Klight
Chima erea driving a Dock Tinted vehicle. Plaintill was subsequently arrested and
Chima erea driving a Dock Tinted vehicle. Plaintill was subsequently arrested and
Charged with a weapon. 22 months clasped safere the Charges were clismissed
Charged with a weapon. 22 months clasped safere as a relate of the fictionous
Plaintiff suffered are and super per 18 hours as a relate of the fictionous
Charges or

V. Injuries PTSD/ANTICHY Die to the trama and oremedic experience On soin Mentey dus about they
If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

Prescribe of Med. cash on for

VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims. The basis for these claims. The last was the organized when all well as the organized when all the control when a

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VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

A.	Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?
	Yes
	☑ No
	If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).
B.	Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?
	Yes
	□ No
	Do not know
C.	Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?
	Yes
	□ No
	Do not know
	If yes, which claim(s)?

-	T 1	Cl. a minute in the init maintain on other compational facility where your alaim(s) area	يو.
D.	Did con	you file a grievance in the jail, prison, or other correctional facility where your claim(s) aros cerning the facts relating to this complaint?	Ç
		Yes	
		No	
		o, did you file a grievance about the events described in this complaint at any other jail, priso er correctional facility?	n,
		Yes	
	□	No	
E.	If y	ou did file a grievance:	
	1.	Where did you file the grievance?	
	2.	What did you claim in your grievance?	
	3.	What was the result, if any?	
	4.	What steps, if any, did you take to appeal that decision? Is the grievance process completed	d?
		not, explain why not. (Describe all efforts to appeal to the highest level of the grievance pr	roc

	F.	If you did not file a grievance:
		1. If there are any reasons why you did not file a grievance, state them here:
		My claims orose outerse the institutions
		2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:
	G.	Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.
		(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)
VIII.	Previo	us Lawsuits
	The "th the fili brough malicio	aree strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying a fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility, that an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, out, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent of serious physical injury." 28 U.S.C. § 1915(g).
	To the	best of your knowledge, have you had a case dismissed based on this "three strikes rule"?
		es
	N	o
	If yes,	state which court dismissed your case, when this occurred, and attach a copy of the order if possible.

A.		we you filed other lawsuits in state or federal court dealing with the same facts involved in this ion?
		Yes
	لسبا	
	$oxed{\Delta}$	No
В.	If y	your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is than one lawsuit, describe the additional lawsuits on another page, using the same format.)
	1.	Parties to the previous lawsuit
		Plaintiff(s)
		Defendant(s)
	2.	Court (if federal court, name the district; if state court, name the county and State)
	3.	Docket or index number
	4.	Name of Judge assigned to your case
	5.	Approximate date of filing lawsuit
	6.	Is the case still pending?
		Yes
		No
		If no, give the approximate date of disposition.
	7.	What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)

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			Yes
		V	No
D).	If yo	our answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is than one lawsuit, describe the additional lawsuits on another page, using the same format.)
		1.	Parties to the previous lawsuit
			Plaintiff(s)
			Defendant(s)
		2.	Court (if federal court, name the district; if state court, name the county and State)
		3.	Docket or index number
		4.	Name of Judge assigned to your case
		5.	Approximate date of filing lawsuit
		6.	Is the case still pending?
			Yes
			□ No
*)			If no, give the approximate date of disposition
		7.	What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)

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IX. **Certification and Closing**

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

For Parties Without an Attorney A.

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result

	in the dismissal of my case.			
	Date of signing: // /	2024		
	Signature of Plaintiff Printed Name of Plaintiff Prison Identification # Prison Address	Darell Ainens 081/64 Daynin County Ari HBG.	State	7]] Zip Code
В.	For Attorneys Date of signing:	, ************************************		
	Signature of Attorney Printed Name of Attorney Bar Number Name of Law Firm Address	City	State	Zip Code
	Telephone Number E-mail Address	City	siate	Σιρ Ουμε

